L09000053720

(Requestor's Name)		
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nai	me)
(Do	cument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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N. CAMPUM JUN 3 - 2009

COVER LETTER

Division of C			
SUBJECT:	S Leoving (Name of Resulting	DIVECTO	ries LUC
	isiness Entity" into a '	rticles of Organization, 'Florida Limited Liabil	and fees are submitted to lity Company" in
Please return all corr	espondence concernin	g this matter to:	
Roser	narie B	reallau	
_ EFC	(Contact Person) (Firm/Company)	Inc	
55	(0 SW 5)	AUP	
	(Address)		
\sim	IA FI	33143	
(0	City, State and Zip Code)		
For further informati	on concerning this ma	tter, please call:	
1/UNDADO	ivie Buogla	14215 4	(153%
(Name of Conta	act Person)	(Area Code and Da	aytime Telephone Number)
Enclosed is a check f	or the following amou	ınt:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILING A	ADDRESS:
Registration Section		Registration	
Division of Corporati Clifton Building	ions	Division of C P. O. Box 633	•
2661 Evecutive Cent	er Circle	Tallahassaa l	

Tallahassee, FL 32301



May 26, 2009

ROSEMARIE BAEALLAO 5960 SW 57 AVENUE MIAMI, FL 33143

SUBJECT: E LEARNING DIRECTORIES, LLC

Ref. Number: W09000024619

We have received your document for E LEARNING DIRECTORIES, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must state the effective date of the conversion. The effective date cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date of the conversion under the laws governing the other business entity.

This document was received on 5/22/09. Also you did not list the name of the second Manager.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 909A00017687

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SECRETARY OF STATE
TALLAHASSEE FLORID:

Certificate of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filling of this				
Certificate of Conversion is: ELECATION DIRECTURES LUC.				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a Delaure LLC (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)				
first organized, formed or incorporated under the laws of <u>Decaware</u> (Enter state, or if a non-U.S. entity, the name of the country)				
on O6/16/2005 (Enter date "Other Business Entity" was first organized, formed or incorporated)				
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:				
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:				
ELEGINING DIVECTOVIES, CLC (Enter Name of Florida Limited Liability Company)				
5. If not effective on the date of filing, enter the effective date: 5/2008 6 6/09 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)				

Signed this 18 day of May	20_0\\.		
Signature of Member or Authorized Representative of Limited Liability Company:			
Signature of Member or Authorized Representative Printed Name: KUSMAVIC BOCALG	Title: Attorney		
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]			
Signature: RUSemane Bacallau	Title: Atteney 1). Incorporation		
Signature:Printed Name:			
Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Signature:Printed Name:	_ Title:		
Signature:Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.			
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.			
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.			
All others: Signature of an authorized person.			
Fees:			
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Co	ompany is:
Elearning	Directores LLC
(Must end with the words "Limited Liability Cor"LLC.")	mpany," the abbreviation "L.L.C.," or the designation

ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:
923 Collens Aut
#011
SUVAS, do F/33154

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Rusemavie Baeq/lao, Esq.

Name

S960 SW 55 QUENTUR!

Florida street address (P.O. Box NOT acceptable) Michai FL 33/45 City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Conversion, if an effective date is listed therein.) REQUIRED SIGNATUR Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

of this document constitutes an affirmation under the penalties of perfect that the facts stated herein are true.)

Typed or printed name of signee

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Page 2 of 2